

Benefits BRIEF



2022 Health Plan Compliance Calendar

• July 2022 •

Employers must comply with certain filing and disclosure requirements each year in connection with their group health plans. This chart summarizes some of the key requirements and is designed to be used as a tool to help facilitate annual compliance.

| | Deadline | Requirement | Description |
|----------|---|---|--|
| JANUARY | 1/31 | Form W-2 | Employers that filed 250 or more W-2s in the prior year must report the cost of employer sponsored group health coverage in Box 12, using Code DD. |
| | 1/31 (3/2 for automatic extension) | Forms 1095-C and 1095-B to <u>Employees</u> | Code Section 6056 and 6055 requires applicable large employers (ALEs) with fully insured and self-insured health plans to provide information about health plan coverage to their full-time employees each year, using IRS Form 1095-C. Non-ALE employers with self-insured health plans use Form 1095-B to provide this health coverage information. |
| FEBRUARY | 2/28 (paper) or 3/31 (electronically) | Form 1094-C and 1095-Cs to <u>IRS</u> | Applicable Large Employers (ALEs) (generally those with 50 or more full-time and full-time equivalent employees) must file with the IRS the 1095-Cs provided to employees along with a 1094-C transmittal form. If the employer is filing fewer than 250 1095-Cs, the employer may mail the forms to the IRS by February 28. Otherwise, the forms must be filed electronically by March 31.* |

This Benefits Brief is not intended to be exhaustive, it is for informational purposes only and should not be considered legal or tax advice. A qualified attorney or other appropriate professional should be consulted on all legal compliance matters.

| | Deadline | Requirement | Description |
|---------------|---|---|--|
| MARCH | 3/1 (for Calendar Year Plans) | Medicare Part D Reporting to CMS | Within 60 days after the beginning of each plan year, employers must report to CMS whether the plan's prescription drug coverage is creditable (has the same or higher actuarial value than Medicare Part D). The filing is electronic and available here . |
| JULY | 7/1 | Public Disclosure of Machine Readable Files (MRFs) | Group health plans must disclose detailed information about in-network rates and out-of-network spending by posting the MRFs on a public website. Insurers of fully insured health plans and TPAs/ASOs of self-funded health plans should create and regularly update the MRFs, but employer-sponsors will be required to post a link to the MRFs on their public website absent a specific agreement with the insurer or TPA/ASO. |
| AUGUST | 8/1 | PCORI Fee | Self-insured group health plan sponsors must calculate, report, and pay an annual fee to fund the Patient Centered Outcomes Research Institute (PCORI) using IRS Form 720. The fee is due July 31 each year through 2029. Note that HRAs offered in conjunction with fully insured group medical plans are subject to the fee. |
| | 8/1 (for Calendar Year Plans) | Form 5500 | Generally, applies to employer group health plans with at least 100 employee-participants at the beginning of the plan year. The Form 5500 must be filed with the DOL by the last day of the 7th month after the plan year ends. A 2½-month extension can be obtained by filing Form 5558 before the return is otherwise due. Since 7/31 falls on a Sunday in 2022, the due date moves to 8/1. |

| | Deadline | Requirement | Description |
|------------------|--|--|---|
| SEPTEMBER | 9/30 (for Calendar Year Plans) | Summary Annual Report (SAR) | The SAR is a short statement concerning the financial condition of the plan. It must be furnished to participants within 9 months after the plan year ends or 2 months after the due date for the Form 5500 filing if an extension is obtained. A SAR is generally only applicable to fully insured plans that are also subject to the Form 5500 filing requirement. If a 2½ month extension was filed for the Form 5500, the SAR due date is December 15. |
| OCTOBER | 10/15 | Medicare Part D Notice of Creditable Coverage | The notice is required to be furnished to all participants who are Medicare Part D eligible individuals who participate in the employer's group health plan. The notice is to be furnished annually before Medicare's open enrollment period which begins on October 15. The notice discloses whether the employer's prescription drug coverage is creditable to assist individuals in deciding whether they need to enroll in Medicare Part D. If the coverage is not creditable and they do not enroll, they will pay a permanently higher premium for Medicare Part D coverage upon later enrollment. The notice must be provided "prior to" October 15. |
| DECEMBER | 12/27 | Prescription Drug Reporting | Insurers of fully insured group health plans will report information regarding costs associated with prescription drug benefits to the DOL, IRS, and HHS; employer-sponsors of self-funded health/prescription drug plans must report the information directly. 2022 reporting must include information from 2020 and 2021; thereafter, annual reporting is due every June 1. |

**The Taxpayer First Act lowered the threshold for electronic filing of information returns. The IRS proposed regulations have not been finalized at this time but employers should be aware that the threshold may change for the 2021 or 2022 reporting year.*

***H.R. 1865, the "Further Consolidated Appropriation Act, 2020" extended the PCORI fee for 10 years. Insurers and employers must continue to pay the PCORI fee until 2029 or 2030 (depending on plan year).*